SPECIAL TRANSPORTATION PERMIT

NUMBER:	Camie to see S	Stay to line	PHILLIPS (COUNTY
DATE:	Communication Communication	DO		
Name:	LOR	B. S.		
Mailing Address:				
City/State/Zip Code:				
Telephone Number:		Fax Number: _		
Has applied for a special size feet by	feet andfe	eet in height from		
The route will be on roads marked with road numbers	as also) clearly
	is responsi	ble for notifying	all affected util	ity
for any damage to the hig result of this move. The to Colorado and needs to be be conducted to determin	ransport needs to deconducted during	observe all safety daylight hours.	regulations of	the State of
Signed by applicant		18		
Phillips County hereby gra	ints approval of the	route and trans	oort as request	ed.
Approval granted this	day of		, 20	
Phillips County Planner				
Inspected on		_ Damages _	None	as follows
				J. 1871

